

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

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Commissioner



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Connecticut Department of Public Health

Testimony Presented Before the Appropriations Committee

House Bill 7027 - An Act Concerning The State Budget For The Biennium Ending June Thirtieth 2019, And Making Appropriations Therefor

February 23, 2017

Commissioner Raul Pino, MD, MPH

Good morning, Senator Osten, Senator Formica, Representative Walker, and members of the Appropriations Committee. I am Dr. Raul Pino, Commissioner of the Department of Public Health (DPH), and I am here to testify in support of the Governor's Biennial Budget for state fiscal years 2018 and 2019.

There is no question that this has been a difficult year from a budgetary perspective, and the coming years will not be any easier. Even with these challenging circumstances, DPH has thrived and will continue to do so. Our recent successes and the ability to face the challenges ahead are the result of a hardworking, professional and nationally recognized workforce that I am proud to represent.

Recent Achievements

Let me highlight several accomplishments that demonstrate the Department's commitment to improving performance, increasing efficiencies, leveraging available resources and its ability to respond to public health emergencies.

- In 2016, Connecticut was ranked as the third healthiest state in the nation - a remarkable improvement from sixth place a year before. This assessment by America's Health Rankings® is a reflection of the work we are all doing to make Connecticut healthier. We are committed to continuous improvement; health disparities continue to be prevalent in our state and DPH will lead the charge to reduce those disparities.



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- Under the leadership of Governor Malloy, DPH and other sister agencies have worked to develop and implement a comprehensive response to the opioid crisis. This is a serious public health threat. In 2015 alone, our Office of Emergency Medical Services (OEMS) recorded 3,272 instances where Narcan (naloxone) was administered at least once. We have developed Narcan training and distribution networks that reach the most vulnerable and high risk users. In FY 2016, DPH distributed, at no charge, 6,920 overdose prevention kits, invested \$258,606 for this purpose, and trained about 2,500 individuals on the safe use of this opioid antagonist. We are also developing a state-wide database to track Narcan distribution and utilization, as well as outcomes associated with use of this lifesaving medication. We have been awarded \$900,000 in federal funding to further advance research and services.
- With a clear mandate from Governor Malloy to deal proactively with the national emergent threat posed by the Zika virus, we developed a response plan and swiftly moved to have our Public Health Laboratory certified to conduct Zika testing; providing our residents with much shorter wait times for test results. We have tested 1,286 individuals, and are closely monitoring 35 babies (including two with confirmed Zika-related birth defects). In total, we have secured federal funds in the amount of \$1.4 million for our response to this emerging infection.
- In our presentation last year, I informed you of our continuing efforts to achieve national public health accreditation. After a thorough multi-year effort, the Department has completed all assessment and planning activities required of applicants for accreditation. A site visit was conducted by the Public Health Accreditation Board last fall, and we are expecting accreditation results by the end of next month. We are very proud of what we have accomplished in this area.
- The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) has successfully transitioned to an electronic benefit transfer (EBT) system; replacing food checks with a swipe card used at authorized stores. The “eWIC” system has increased efficiency, enhanced program integrity and removed the stigma associated with check use at the retailer. The overall shopping experience for participants and retailers has greatly improved. We serve approximately 50,000 enrollees in the WIC program.
- On February 1, 2017, DPH submitted to the General Assembly a report concerning the expenditures necessary to ensure the continued administration of safe drinking water standards for public drinking water in a time of declining federal funding. Our Drinking Water Section oversees and regulates more than 2,500 public water systems, which use or rely upon approximately 4,400 high quality public drinking water sources and serve over 2.9 million residents. We inspect approximately 600 public water systems and monitor over 500,000 drinking water quality tests results annually.
- In 2016, DPH rolled out an electronic web based Vital Records system, called ConnVRS, for the registration of birth events occurring in Connecticut. This is an interactive system that is utilized by DPH, birth hospitals, and all 169 town clerk’s offices in our state. It enables parents to have more rapid and convenient access to their child’s birth certificate. A parent of a baby born in or after 2016 can now go to any town clerk’s office in the state to obtain a copy of their child’s birth certificate. Before the end of this fiscal year, we will have

migrated all records from our previous electronic system so that birth certificates for children born in 2003 or later will be similarly available. Birth certificates for children born before 2002 are available at the town clerk's office of the town where the mother resided at the time of the birth.

- We collaborated with the Office of the Treasurer to educate parents of newborn babies about their options under the Connecticut Higher Education Trust (CHET) Baby Scholars program. This collaboration resulted in an increase in enrollment for CHET from 4 to 8 percent of new births in the first year.
- A report issued by the U.S. Centers for Disease Control and Prevention's National Center for Immunizations and Respiratory Diseases showed that Connecticut has the highest childhood immunization coverage rate of any state in the nation. With your support, we will continue to enhance this important program. ***The Governor has proposed to add Human Papillomavirus (HPV) vaccine to our Connecticut Vaccine Program for children.*** This vaccine protects against several forms of cancer for both females and males, impacting the lives of future generations. To provide just one example, 352 females have died of cervical cancer in our state in the last ten years. We can prevent some of these deaths with the HPV vaccine.

Proposed 2018-2019 Biennial Budget

The Governor's proposed DPH budget totals approximately \$116.9 million in FY 2018, with \$62.6 million coming from the General Fund and \$54.3 million from the Insurance Fund. For FY 2019, the proposed amount is again \$116.9 million, with \$61.5 million coming from the General Fund and \$55.4 million from the Insurance Fund. The proposed budget protects DPH's ability to meet state match and maintenance of effort obligations for funds awarded by the federal government. Below are some of the highlights of the biennial budget.

Agency Operations

The Department will continue to monitor and evaluate its workforce needs to ensure that it maintains the necessary staffing required to support our core public health functions. DPH will also continue to analyze Other Expenses needs, achieving cost savings through efficiencies, leveraged support and other measures. Major recommended changes include:

- Approximately \$2.8 million is recommended in each of FY 2018 and FY 2019 to consolidate support for the agency's newborn screening program on the General Fund;
- two positions are added to implement a licensure program for urgent care facilities, which will assist the Department of Social Services in pursuing a new initiative to reduce non-emergent emergency department visits;
- Approximately \$0.3 million in FY 2018 and \$1.1 million in FY 2019 is provided to sustain the Drinking Water Section in response to a reduction in available federal funding and to facilitate implementation of a "license to operate" program for public water systems; and
- two positions are recommended for the Office of Health Care Access (OHCA) to implement changes based on Certificate of Need Task Force findings.

Office of Health Strategy

The Governor proposes to move the Office of Health Care Access (OHCA) into a new Office of Health Strategy (OHS), beginning in fiscal year 2019. Approximately \$2.0 million is reallocated from DPH's General Fund appropriation to the new Office, which will be under DPH for administrative purposes only.

Public Health Programs

Funding is increased under the Immunization Services account, by \$11.4 million in FY 2018 and an incremental \$1.1 million in FY 2019, to support anticipated cost increases for vaccines purchased at prices negotiated by the federal Centers for Disease Control; as well as provide funding to support the universal distribution of HPV vaccine to insured children between 9 and 12 years old.

The proposed budget includes approximately \$3.1 million in funding under the Children's Health Initiatives (CHI) account. This reflects the consolidation of programming formerly supported via the CHI, Childhood Lead Poisoning, Children with Special Health Care Needs, and Genetic Diseases Program accounts. In FY 2017, these programs were funded from the Biomedical Research Trust Fund. Support for community-based asthma programs is proposed to be discontinued.

Fully funding the statutorily defined formula grants to eligible local health departments and districts would result in approximately \$4.6 million in expenditures in FY 2018. The Governor recommends a twenty percent reduction from this baseline amount (or \$921,020) for FY 2018 and FY 2019, to be achieved by reducing grant awards on a pro-rata basis. This represents a reduction of approximately \$0.4 million as compared to the total amount awarded to health departments and districts in the current fiscal year.

The proposed appropriation for the School Based Health Clinics account is reduced by approximately \$0.8 million as compared to available FY 2017 funding. A total of 44,118 students were enrolled in school based health centers during the 2014-2015 school year.

Under the Community Health Services account, the proposed budget preserves combined funding of approximately \$1.5 million that supports health care services provided by Planned Parenthood, as well as community-based programs promoting access to health care. However, \$358,728 in funding for community health centers is proposed to be eliminated.

Finally, level funding is proposed for the Needle and Syringe Exchange Program (\$459,416), Venereal Disease Control (\$197,171), Breast and Cervical Cancer Detection and Treatment (approximately \$2.15 million) and AIDS Services (approximately \$4.98 million) accounts.

Thank you for this opportunity to discuss the Governor's proposed FY 2018-2019 budget for the Department of Public Health. I would be happy to answer any questions.